1

Centers for Medicare & Medicaid Services National Stakeholder Call

September 17, 2021

12:30 P.M. ET

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BETH LYNK: Hello and welcome. We will get started in one moment as everyone is joining

us in the room. Thank you so much for taking some time to spend the afternoon with CMS.

We are going to give it one more moment.

Great. Thank you, everyone. It is wonderful to see that all 3500 folks on the line for this

National Stakeholder Call from the Centers for Medicare & Medicaid Services. I'm going to

without delay turn to our leader, and administrator, Chiquita Brooks-LaSure. Administrator?

OPERATOR: Recording in progress.

CHIQUITA BROOKS-LASURE: Thank you, Beth. And thank you all for joining us today.

And I want to start by saying what a privilege it is to be here with all of you because you are on

the front lines of all of the work that we do here at CMS and particularly as we, the country,

continue to wrestle with the pandemic, we so appreciate the hard work of the people on this call

to enroll people in coverage, to make sure that people have access to vaccines, have access to

care, and we know how hard you all have been working over the last 19 months and thank you

so much for that.

We also thank you for all of your work to support the programs of the CMS -- that CMS has

the privilege of administering and overseeing the three M's as we like to say: Medicare, Medicaid and CHIP, and marketplace coverage.

And what a tremendous privilege it is to be in this seat and surrounded by the other faces in our team which I will be happy to introduce to you in just a few minutes as well as give you a chance to hear from them as well. I just wanted to start by saying a little bit about what we have been able to accomplish over the last 100 days. We are incredibly excited about just the role that the Biden-Harris administration has been able to take in supporting the Affordable Care Act and supporting all of our programs. We are just coming off the heels of our special enrollment period where we are just tremendously uplifted at the lessons learned that have enabled the collective us to be able to enroll so many millions of Americans in coverage. What we have seen is that when you reach out and make sure that you are doing outreach and enrollment efforts, that people come. And what we have also seen is when we make coverage affordable, people will take it up.

So, as you know, we saw a bump in an increase in coverage at the beginning of the special enrollment period where we, CMS, increased our outreach efforts and where I know all of you worked to get people enrolled. And then another significant increase when the American rescue plan subsidies took effect. So more than 2.5 million people were newly able to receive coverage bringing us to record levels in the marketplace. We have seen significant savings that make a real difference to the lives of people. I had the privilege of being in Delaware when we awarded navigators and heard the story of a woman who because of the American rescue plan saved \$70 a month and her medications cost \$50 a month. So being able to see those changes

over the country for millions is why we do what we do.

And not to forget the Medicaid program which is taking over as the largest M in CMS. We have some friendly competition among our centers and the Medicaid program continues to expand and now can boast the largest coverage which we know we administer along with our partners, the states, and the hard work that everyone has done to make sure that people have access to care and coverage and to get to these record levels is incredibly exciting and one of the things that we will be focused on moving forward is making sure that we hold onto and expand that enrollment. And we continue to be excited about our Medicare programs which is strong and robust and probably will be strengthened. I'm very optimistic by our Congress. The President has asked Congress to expand and support the Medicare program by making coverage more affordable for prescription drugs which we know is such a key issue for millions across our country as well as continuing to expand benefits and make sure we are caring for seniors and people with disabilities. It's a priority of ours to make sure that we are coordinating our dual eligibles, working with all of you to make sure we continue to enroll those who are not enrolled in Medicare part D and in the Medicare savings program.

So, I'm just going to briefly say you probably have seen our six pillars but just to walk through at a high level to really talk about how the six pillars are guiding our work. We first start with advancing health equity by addressing the health disparities that underly our health systems. The way we are approaching that at CMS is asking that question in every meeting as we evaluate every policy decision, every operational decision, and as we start to ask ourselves that question we start to make sure that we are advancing policies that actually change the lives

of people. And our orientation continues to be around focusing on the people that we serve and making sure that our decisions benefit them. We continue to build on the Affordable Care Act which means enrolling people in any of the M's that they are eligible for or employer-sponsored insurance, and making sure that that coverage is leading to care so that people are actually seeing the providers that provide care.

We are focused on our partners. Really making sure that we are engaging with you not just to hear your issues and your concerns but to make sure we are integrating what you have to say to us into our policy and operational decisions.

We want to drive innovation. I would love to quote John Blum of being best in class and really making sure that we are leading in terms of tackling our health system changes and promoting value-based person-centered care.

We are focused, still, on making sure that we are being good stewards of the taxpayer dollars whether in any of the programs but particularly that we protect Medicare solvency to make sure that that program is sustainable for all of the people that have paid into it. And finally, focused on having a positive and inclusive workplace and work force. It's only by being a strong team will we get the best work and make the best decisions. And so, we are also focused on making sure that CMS is operating well. Which is why I'm so pleased to introduce members of the CMS team. I am thrilled as the people who said yes to the call that continue to serve their government starting with what I know someone you all know Jon Blum our Principal Deputy Administrator as well as our COO. You just met Beth Lynk, who is our Communications

Director. We are thrilled to say, we are adding a Chief Dental Officer because we care about making sure that oral health is a part of our vision of health care and so we are happy to introduce Dr. Natalia Chalmers. Sarah Corrigan joined us to make sure we are being good stewards of the taxpayer dollar as well as being proactive in making sure we are protecting all of our beneficiaries as the head of the consumer -- the head of the Center for Program Integrity. Dr. Ellen Montz is our CCIIO Director, focused on, as you know, market place and insurance reform in the private market. Dan Tsai, in charge of our Centers for Medicaid Services, Liz Fowler, a long time expert in so many areas is heading you have our innovation center. Dr. Meena Seshamani is our head of the Medicare program. So, I'm going to turn it over first to I think I'm turning it over to you, Meena, to start. But again, we are all just thrilled to be with you today. Meena?

MEENA SESHAMANI: Thank you, Chiquita. And it's wonderful to be here with all of you and to be working with this team in public service. There's so much good work for all of us to do together. And I think in Medicare certainly, one of the big things coming up is open enrollment. And how we do open enrollment really will reflect the pillars that our administrator referred to. How we can look to promoting equity, person-centered care, affordability, and really keeping the Medicare beneficiary at the center and engaging our stakeholders in what we do. So, to that end, as a reminder Medicare open enrollment for coverage will run from October 15th to December 7th, 2021. Again, we are committed to ensuring that the health system and Medicare works for patients, their families and their communities. Really putting the beneficiary at the center of everything that we are doing. People eligible for Medicare have options for how to get their Medicare coverage, both original

Medicare and Medicare advantage. So open enrollment is that one time of year where more than 60 million people with Medicare can review their health care coverage to find now plans or change their plans, discover extra benefits and help them save money.

So, to this end, you know, we have several ways to support people as they are making decisions. So Medicare.gov provides clear, easy to use information as well as an up-dated Medicare plan-finder to allow people with Medicare to compare their personalized options for health and drug coverage and to get information on how to enroll. So, there's Medicare.gov.

Then there's 1-800 Medicare, which is available 24 hours a day, seven days a week to help in English and Spanish as well as language support in over 200 languages. Third, people enrolled in Medicare can contact their state health insurance programs. SHIPhealth.org for one on one assistance. So, there are three avenues to be able to get support because Medicare health and drug plan costs and benefits can change from year to year so people should really look at their coverage choices annually to decide what option best meets their needs. And to the point that our administrator raised on equity, low-income seniors and adults with disabilities may qualify to receive financial assistance from Medicare savings programs. These programs can help millions of Americans to access high-quality health care at a reduced cost but only about half of eligible people are enrolled.

You know, in helping to pay Medicare premiums they can pay original Medicare deductibles, co-insurance, copayments, so for eligible people enrolling in one of those programs can offer relief from these costs allowing people to spend that money on food, housing, transportation, other issues. So again, really, we will be working hard and in

partnership with all of you to make sure people are aware of their options, can make decisions best for them, but finally people who end up wanting to keep their current Medicare coverage don't need to reenroll.

So, I think with that I'm going to turn it to Ellen Montz to talk more about marketplace enrollment.

ELLEN MONTZ: Thanks, Meena. Good afternoon, everyone. It's such a pleasure to be here. I wanted to take in again what our administrator highlighted, thanks to the special enrollment period that brought coverage to roughly 2.8 million Americans, the additional premium tax credits that is available under the American Rescue Plan, reduced premiums for over 90% of consumers who enrolled in that special enrollment period and critically your tireless work. We ever a marketplace with its highest ever enrollment. Wow. And as we conclude this remarkably successful special enrollment period I'm looking forward to keeping momentum going for this year's open enrollment which starts November 1st. I know that so many of you are already actively involved in planning for open enrollment whether you're running the marketplace in your own state, putting products on the shelf as issuers, doing your training as a Navigator, assister, agent or broker, or working on the ground in your community, your work is what is connecting millions of Americans to this vital coverage.

Finally, we also know that underserved Americans disproportionately remain without coverage. This fact helps drive our open enrollment numbers. That's why we announced a historic level of support for navigators and we look forward to launching a robust outreach and

enrollment campaign to support this effort and importantly, support your work. I'm looking forward to our work together to make this open enrollment a resounding success. Next, I'll turn it over to our Principal Deputy Administrator, John Blum.

JONATHAN BLUM: Thank you. Great to be here and proud of this team here. I think we also see that our core mission is to make sure that we are keeping the health care system safe and very responsive to the current pandemic. We pledge to work with the whole industry, consumers, to ensure we will of the safest health care system going forward, to ensure we are ready to pay for whatever comes our way whether it's new treatments, new vaccine recommendations, CMS stands ready to work with the industry to work with consumers, all beneficiaries to ensure that we stay safe and that we have the best responses to the current pandemic. Thank you for your support. We have more work to do. We have more regulations coming out very soon. CMS really pledges to be a good partner, trusted partner, to ensure that we keep folks safe and keep the whole health care system working during this very critical time. So, with that I'll turn to Beth for some questions. Thank you, everybody.

BETH LYNK: Thank you, John. Thank you, everyone, for the great remarks. We received a number of questions from folks. I know we have about 4200 folks on line right now. For time sake we selected three from the number of questions that we received to highlight here. And then we'll certainly be following up with some of those other questions that were submitted from folks.

So, I'm going to turn to the administrator for the first question, which comes from Jeff

Leston, who is the president from Castlestone Advisors, LLC. He asks: What improved or enhanced efforts will CMS make to reduce Medicare fraud and what can CMS do to eliminate the disincentives to reduce Medicaid fraud?

CHIQUITA BROOKS-LASURE: Thanks so much for the question. We are continuing to conduct focused outreach and want to make sure we are amplifying the message that people need to guard their card, protect their personally identifying information, and remind everyone if they think something is a scam to call 1-800 Medicare. We want Medicaid to continue to work on this alignment. We are happy to follow up depending on sort of the person asking about whether this is a state officer or a national entity and happy to connect you to Dan and make sure that we can connect with you more broadly. And of course, as I mentioned, Dara, who joined our team and is leading the effort to make sure that we are being good stewards again as the taxpayer dollars and making sure we are protecting beneficiaries.

BETH LYNK: Thank you. So, our next question comes from Dr. James Bush who is a state Medicaid Medical Officer. He asks as Medicare moves towards more APM implementation, how can states partner with the -- how can CMS partner with each states Medicare program to align payment and quality measures? He's looking for that point of contact at CMS who can help with data sharing and aligning of quality measures.

CHIQUITA BROOKS-LASURE: Thanks for the question. It's key to make sure people know they can reach out to us. And again, just want to emphasize how responsive we want to be. I want to make sure that everyone knows that we have an office in the regional office that we

have offices regionally. Nancy O'Connor is the head of our office of programs operations and local engagement. Nancy is doing an incredible job. I've had the pleasure of meeting with two regional offices. And her work really makes sure and help with these linkages so feel free to contact our regional offices as a place to start so we can make sure we are connecting with all of you.

On the broader question of how there can be alignment in the Medicaid program with all of the great work that is going on across the agency, whether in the Liz world of the innovation center or the Meena world of value-based care, we are really working to make sure that all of our efforts where states are able to participate are integrated, and please come to us with your ideas and suggestions on ways that we can do that better.

BETH LYNK: Thank you. So, our third and final question comes from Julie Benton who is a community organizer. She asks how can groups and small businesses engage with you and get resources during the upcoming open enrollment period for Medicare and Medicare.gov?

CHIQUITA BROOKS-LASURE: We are very thrilled at your question. The best place to go for Medicare is to go to the Medicare website, <a href="www.Medicare.gov">www.Medicare.gov</a>. There's a page that has forms and resources. That link will take you to the resources that are available to partner to help to make sure you have the resources you need. On marketplace open enrollment we are very focused on making sure this is the most robust open enrollment period every and today we are announcing we are relaunching our champions for coverage program. Private and public organizations, businesses, are able to promote the insurance marketplaces through that. So, we

11

encourage you to engage in the various educational outreach efforts that we have under way led

by work under Beth. And you can apply for these programs at marketplace.cms.gov.

BETH LYNK: Thank you so much. So that's all the questions we have time for right now. As

I mentioned, we'll be following up with some of the other questions that came in. So, with that

I want to turn it to the administrator for any final words and then we will close the call.

CHIQUITA BROOKS-LASURE: So, it's so hard in this virtual world sometimes to feel

connected but we just want to emphasize how much this organization, this team, wants to

engage with all of you in a very direct way. And as Beth said, we will continue to hold these

calls so that we are updating you on some of the topics and getting out some of the news of the

day. But want to continue to have small group meetings and discussions and engagement at

multiple levels so that we can advance the six pillars particularly on addressing health

disparities across our under-served populations. So, we want to continue to thank you for the

partnership you have with CMS for coming to us with your ideas and suggestions. And we

look forward to future engagement. Thank you for being here with us.

OPERATOR: Recording stopped.

(Event concluded)